

Provider Inspection Summary
For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

Facility Information

Facility Name: WE CARE GROUP HOME INC (0009838)

Address: 7554 N 87TH ST, MILWAUKEE, WI 53224

License Status: REGULAR

Licensed/Certified/Registered 03/16/2004

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096914 **End Date:** 04/26/2006 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10011856 Served 05/13/2006

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.33(2)(a)	SUPERVISION		
83.33(3)(b)2.d	MEDICATION STORAGE SHALL BE LOCKED		
83.41(10)(a)	BUILDING MAINTENANCE		
83.43(1)	FIRE PROTECTION SYSTEM		
83.43(4)(a)	LOCATION OF DETECTORS		
83.55(4)(b)3	EXTENSION CORD RESTRICTIONS		

Survey ID: 0094892 **End Date:** 05/17/2005 **Type:** OTHER **Purpose:** DESK REVIEW

Results: NO STATEMENT OF DEFICIENCY ISSUED

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Survey ID: 0094539 End Date: 03/30/2005 Type: OTHER Purpose: DESK REVIEW

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009096 Served 04/15/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(6)(b)	CREDENTIALLED CAREGIVERS	04/30/2005	Yes

Survey ID: 0093742 End Date: 12/02/2004 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092570 End Date: 04/16/2004 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092358 End Date: 03/08/2004 Type: STANDARD Purpose: SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008977 Served 04/16/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.42(8)(b)	FIRE EXTINGUISHER	12/02/2004	Yes

Survey ID: 0090557 End Date: 06/11/2003 Type: INITIAL Purpose: SURVEY

Results: PROBATIONARY LICENSE ISSUED

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Enforcement History

Date: 05/12/2006	SOD #10011856	Appealed: No
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Sanctions

COMPLY WITH REQUIREMENT

Date: 04/13/2005	SOD #10009096	Appealed: No
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Sanctions

COMPLY WITH REQUIREMENT

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Provider Inspection Summary

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Community Based Residential Facility
CLASS AA (AMBULATORY)

Complaint History

Date Complaint Received: 01/20/2006

Date Investigation Completed: 04/26/2006

Subject Area(s)

HOMELIKE ENVIRONMENT & CLEANLINESS
NUTRITION & FOOD SERVICES
ADMINISTRATION

Result

SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

10011856

Date Complaint Received: 06/11/2004

Date Investigation Completed: 12/02/2004

Subject Area(s)

HOMELIKE ENVIRONMENT & CLEANLINESS
NUTRITION & FOOD SERVICES
PROGRAM SERVICES

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 04/16/2004

Date Investigation Completed: 04/20/2004

Subject Area(s)

NUTRITION & FOOD SERVICES
ADMINISTRATION
PROGRAM SERVICES

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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